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Question 1. A female patient is suspected of having psoriasis. Which of the following aspects of the woman's history and her care provider's assessment would be potential contributors to her health problem? The woman takes an angiotensin-converting enzyme inhibitor for the





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treatment of hypertension. She has been diagnosed with arthritis. The woman has a family history of diabetes. Skin trauma of any kind often precedes an outbreak. The woman has dark skin. Question 2. Which of the following pathophysiologic phenomena would be most indicative of





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ankylosing spondylitis? Loss of motion in the spinal column and eventual kyphosis A progressive loss of range of motion in knee and hip joints A facial “butterfly rash” and multiorgan involvement Decreased bone density in long bones Question 3. The father of an 18-month-old girl







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noticed a small vesicle on her face several days ago. The lesion ruptured and left a straw-colored crust that remained on the girl's face. The eruption of new vesicles has prompted him to bring the child to the emergency department. Which of the following treatments for the child's skin problem is





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30 days. Mitosis that begins with the cells of the stratum granulosum results in a continual supply of new keratinocytes. The stratum germinativum continuously produces new keratinocytes to replace losses. The basal cells of the epidermis migrate to the skin surface at a rate that matches







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superficial losses of skin cells. Question 5. A 35-year-old woman who has been in recovery from alcoholism for 2 years presents at her primary care nurse practitioner's office with chronic hip pain. She reports that as part of her commitment to her recovery, she began exercising







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regularly about a year earlier. After a month or two, her hip began to hurt when she ran on the treadmill. She stretches, has had a physical trainer check her form to ensure that it is correct, and rests adequately between each workout. Six months ago the pain began awakening her at night, and now





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it is constant. She is not aware of any injury to her hip and has no other outward symptoms. Which of the following is most likely to be the cause of her pain? Hematogenous osteomyelitis  
Osteomyelitis with vascular insufficiency  
Tuberculosis of the bone  
Osteonecrosis    Question 6.





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sensory nerve impulse conduction Formation of blisters on various skin surfaces Lack of adhesion between the dermis and epidermis Large immunoglobulin deposits Question 7.  
An 80-year-old female with a diagnosis of osteoporosis receives daily supplements of calcitonin in the form





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of a nasal spray that she instills each morning. Which of the following phenomena would her care providers expect to result from her supplementation? Decreased serum calcium levels  
Increased bone resorption Acceleration of osteoclast action  
Increased bone formation Question 8. A





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41-year-old woman has been diagnosed as having a loose body of cartilage in her left knee. What data would be most likely to lead clinicians to this conclusion? A visible hematoma is present on the anterior portion of the knee. The woman experiences intermittent, painful locking of her joint.







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Computed tomography indicates a complete tear of her knee ligament. An X-ray shows that her femoral head and tibia are no longer articulated.

Attachments Question Field #Nursing





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